



# Buckie Amateur Swimming Club



**INVITE YOU TO THEIR ANNUAL AGE GROUP CHAMPIONSHIPS**

(under SASA rules)

at Buckie Swimming Pool and Fitness Centre

on **Saturday 25 April 2009**

**Accreditation has been applied for - Licence No ND/LA2/660/APR09**

- POOL** 5 lane, 25 m, anti-turbulence ropes  
**Please note due to very limited spectator seating, priority MUST be given to competitors.**
- EVENTS** See attached event sheet. All events declared winners. Over the top starts will be used where necessary. Heats may be restricted to run the meet within time limits as per District regulations.
- AGE GROUPS** 10-15 years 200 m Freestyle, 200 m IM  
10 years 100 m fly, back breast, freestyle  
11 years 100 m fly, back, breast, freestyle  
12-13 years 100 m fly, back, breast, freestyle  
14-15 years 100 m fly, back, breast, freestyle  
**Ages as on day of meet - 25 April 2009**
- SESSIONS** Session 1 warm-up 8.00 am start 9.00 am  
Session 2 warm-up 1.00 pm start 2.00 pm
- ENTRIES** £4.25 per individual event.  
**Only entries on Hy-tek Meet Manager files will be accepted. Please download from District website or on request to Entries convenor.**  
All swimmers must be registered with SASA and have paid their current fee, please therefore sign the declaration. Cheques to be made payable to BUCKIE ASC. **Please enclose SAE with your entry for any refunds.**
- OFFICIALS** Please complete and return officials/summary sheet with your entry.
- MEDALS** Medals will be presented to 1<sup>st</sup>, 2<sup>nd</sup> and 3<sup>rd</sup> places.
- AWARDS** Wynn Trophy Best Club (points for first 5 places)  
Slater Trophy Best Performance male swimmer  
FMA Shield Best Performance female swimmer  
Wallace Trophy Best Local Performance
- NB. No points will be awarded for Open Events**
- CLOSING DATE** **SATURDAY 28<sup>th</sup> March 2009**  
**No late entries will be accepted.** A draft programme, including reserve places, will be emailed to Meet Secretaries soon after the closing date.
- GALA** **Mrs Susan Herbert 6 Hall Street, Buckie AB56 1JB**
- CONVENOR** Tel - 01542 834361  
Email buckieasc@googlemail.com
- ENTRIES** **Mrs Vivienne Cross, 27 Steinbeck Road, BUCKIE AB56 1DG**
- SECRETARY** Tel - 01542 835378  
Email - BuckieASC@hotmail.com

**Session 1**

Event	101	10-15 years	Boys - 200 m IM
	102	10-15 years	Girls - 200 m IM
	103	10 years	Boys - 100 m Butterfly
	104	10 years	Girls - 100 m Butterfly
	105	11 years	Boys - 100 m Freestyle
	106	11 years	Girls - 100 m Freestyle
	107	12-13 years	Boys - 100 m Breaststroke
	108	12-13 years	Girls - 100 m Breaststroke
	109	14-15 years	Boys - 100 m Backstroke
	110	14-15 years	Girls - 100 m Backstroke
	111	10 years	Boys - 100 m Breaststroke
	112	10 years	Girls - 100 m Breaststroke
	113	11 years	Boys - 100 m Butterfly
	114	11 years	Girls - 100 m Butterfly
	115	12/13 years	Boys - 100 m Backstroke
	116	12/13 years	Girls - 100 m Backstroke
	117	14/15 years	Boys - 100 m Freestyle
	118	14/15 years	Girls - 100 m Freestyle

**Session 2**

Event	201	10-15 years	Girls - 200 m Freestyle
	202	10-15 years	Boys - 200 m Freestyle
	203	10 years	Boys - 100 m Backstroke
	204	10 years	Girls - 100 m Backstroke
	205	11 years	Boys - 100 m Breaststroke
	206	11 years	Girls - 100 m Breaststroke
	207	12-13 years	Boys - 100 m Freestyle
	208	12-13 years	Girls - 100 m Freestyle
	209	14-15 years	Boys - 100 m Butterfly
	210	14-15 years	Girls - 100 m Butterfly
	211	10 years	Boys - 100 m Freestyle
	212	10 years	Girls - 100 m Freestyle
	213	11 years	Boys - 100 m Backstroke
	214	11 years	Girls - 100 m Backstroke
	215	12-13 years	Boys - 100 m Butterfly
	216	12-13 years	Girls - 100 m Butterfly
	217	14-15 years	Boys - 100 m Breaststroke
	218	14-15 years	Girls - 100 m Breaststroke



# Buckie Amateur Swimming Club

## Technical Officials

Please provide as many technical officials per session per club as possible. Please return this sheet with your entry

### Session 1

Name	Signature required Y/N	Time keeper	Turn Judge J1	Stroke Judge J2	Starter J2S	Recorder

### Session 2

Name	Signature required Y/N	Time keeper	Turn Judge J1	Stroke Judge J2	Starter J2S	Recorder

### Shadow Judges

Please indicate those required Turn Judge/Relay Take Off/Chief Inspector of Turns

Name	Preference 1	Preference 2

Club Name & Code \_\_\_\_\_

STO Contact Name & Tel No: \_\_\_\_\_

Email: \_\_\_\_\_

**SUMMARY OF ENTRY and SASA DECLARATION**

**ENTRY SUMMARY**

..... Individual girl swims @ £4.25 .....

..... Individual boy swims @ £4.25 .....

TOTAL ENCLOSED .....

**SASA DECLARATION**

I confirm that all swimmers entered from ..... (club name) have paid their current SASA membership fees.

Signed .....

Position in club .....

Name and address of club contact for accepted swims:

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Contact telephone no: .....

Email address: .....